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APPLICANTS

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** CONTINUING DATA *****

None, on

** FOREIGN APPLICATIONS *****

None, on

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MD	SHEETS DRAWING 9	TOTAL CLAIMS 80	INDEPENDENT CLAIMS 9
Verified and Acknowledged	Examiner's Signature <u>DN</u> Initials				

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TITLE

SYSTEM AND METHOD TO QUALIFY A LINE PAIR

FILING FEE RECEIVED 2464	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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